Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

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Effective October 1, 2001

10065045

| Ellocato October 1, 2001         |  |   |  |              |                                 |                  |                   | 10061045 |                        |                            |                     |                        |  |
|----------------------------------|--|---|--|--------------|---------------------------------|------------------|-------------------|----------|------------------------|----------------------------|---------------------|------------------------|--|
|                                  |  | CLAIMS AS                                 | (Column 1)                             |              | (Column 2)                      |                  | SMALL ENTITY TYPE |          | OR                     | OTHER THAN R SMALL ENTITY  |                     |                        |  |
| TOTAL CLAIMS                     |  |   | 20                                     |              |                                 |                  | RA                | TE       | FEE                    |                            | RATE                | FEE                    |  |
| FOR                              |  |   | NUMBER FILED                           |              | NUMBER EXTRA                    |                  | BASI              | C FEE    | 370.00                 | OR                         | BASIC FEE           | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS          |  |   | 20 minus 20=                           |              | *                               |                  | X\$ 9=            |          |                        | OR                         | X\$18=              |                        |  |
| INDEPENDENT CLAIMS               |  |   | ح minus 3 =                            |              | * _                             |                  | X42=              |          |                        | OR                         | X84=                |                        |  |
| MULTIPLE DEPENDENT CLAIM P       |  |   | RESENT                                 |              |                                 |                  | +140=             |          |                        | OR                         | +280=               |                        |  |
| * If                             | the difference   | in column 1 is                            | less than zero, enter "0" in column 2  |              |                                 | TOTAL 370        |                   |          | <del>O</del> R         | TOTAL                      |                     |                        |  |
|                                  | CI   | LAIMS AS A                                | MENDED - PART II (Column 2) (Column 3) |              |                                 | SMALL ENTITY     |                   |          | OR                     | OTHER THAN<br>SMALL ENTITY |                     |                        |  |
| AMENDMENT A                      |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | NUM<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA | RA                | TE       | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|                                  | Total  | · 33                                      | Minus                                  | *            | (0)                             | = 13             | X\$               | 9=       | 117                    | OR                         | X\$18=              |                        |  |
|                                  | Independent  | . 4                                       | Minus                                  | ***          | 3                               | =                | X4                | 2=       | 42                     | OR                         | X84=                |                        |  |
| L                                | FIRST PRESE  | NTATION OF MI                             | JETIPLE DEI                            | PENDEN       | I CLAIM                         |                  | +14               | 10=      |                        | OR                         | +280=               |                        |  |
|                                  |  |   |  |              |                                 |                  |                   | OTAL     |                        | OR                         | TOTAL<br>ADDIT. FEE |                        |  |
| (Column 1) (Column 2) (Column 3) |  |   |  |              |                                 |                  |                   |          |                        |                            |                     |                        |  |
| AMENDMENT B                      |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | NUI<br>PREV  | HEST<br>MBER<br>HOUSLY<br>D FOR | PRESENT<br>EXTRA | RA                | TE       | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| NDN                              | Total  | *   | Minus                                  | **           |                                 | =                | X\$               | 9=       |                        | OR                         | X\$18=              |                        |  |
| <b>AME</b>                       | Independent  | *   | Minus                                  | ***          |                                 | =                | X                 | 2=       |                        | OR                         | X84=                |                        |  |
| L                                | FIRST PRESE  | NTATION OF M                              | ULTIPLE DE                             | PENDEN       | II CLAIM                        |                  | +1-               | 40=      |                        | OR                         | +280=               |                        |  |
|                                  |  |   |  |              |                                 |                  | ADDI              | OTAL     |                        | OR                         | TOTAL<br>ADDIT. FEE |                        |  |
| (Column 1) (Column 2) (Column 3) |  |   |  |              |                                 |                  |                   |          |                        |                            |                     |                        |  |
| AMENDMENT C                      |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | NU<br>PREV   | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA | R/                | ATE.     | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|                                  | Total  | *   | Minus                                  | **           |                                 | =                | X                 | 9=       |                        | OR                         | X\$18=              |                        |  |
|                                  | Independent  | *   | Minus                                  | ***          | . <del>.</del>                  | =                | X4                | 12=      |                        | OR                         | X84=                |                        |  |
| L                                | FIRST PRESE  | ENTATION OF M                             | ULTIPLE DE                             | PENDE        | NT CLAIM                        |                  | J                 | 40=      |                        | OR                         | +280=               |                        |  |
|                                  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |   |  |              |                                 |                  |                   |          |                        | -                          | TOTAL               |                        |  |
| "                                | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |  |              |                                 |                  |                   |          |                        |                            |                     |                        |  |